

## Board, Commission or Committee Application

Applicant Name:	
Home Address:	Phone:
City, State, Zip Code:	Unlisted?
Work Address:	Phone:
City, State, Zip Code:	
Please provide the times you are available to ser	serve on this Board/Commission/Council:
Please provide a brief description of your qualif asset to this Board, Commission or Council:	lifications, experience, or interests which would be considered as
	. N.
My resume/letter of interest is attached: Yes_	s No
I certify that the information provided is true a	and accurate to the best of my knowledge.
Signai	ature Date

You may deliver this application to the County Manager's Office, 6th floor, Clark County Government Center, 500 South Grand Central Parkway, Las Vegas, or mail to the following address:

Clark County Manager
Attn: Agenda Analyst
Administrative Services – 6<sup>th</sup> Floor
P.O. Box 551712
Las Vegas, Nevada 89155-1712

(This document becomes a public record once it has been received by Clark County.)